

COMBINED NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES & PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. 1.136(a) (Large Entry)				Docket No. 1504	
In Re Application Of: KIRCHER					
Application No. 09/806,356	Filing Date 03/29/2001	Examiner BROWN, V.	Customer No. 278	Group Art Unit 2635	Confirmation No.
Invention: METHOD FOR CONTRUCTION DATA CONNECTION...					<div style="border: 1px solid black; padding: 2px; display: inline-block;"> RECEIVED CENTRAL FAX JAN 26 </div>

COMMISSIONER FOR PATENTS:

This is a combined Notice of Appeal from the Primary Examiner to the Board of Patent Appeals and Interferences and petition under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of 07/27/2004 in the above-identified application.

Applicant(s) hereby appeal(s) to the Board of Patent Appeals and Interferences from the decision of the Primary Examiner dated _____ finally rejecting Claim(s)

Applicant(s) hereby request(s) an extension of time of (check desired time period):

☒ One month
☐ Two months
☐ Three months
☐ Four months
☐ Five months

from: DECEMBER 27, 2004 until: JANUARY 27, 2005

Date Date

The fee for the Notice of Appeal and Extension of Time has been calculated as shown below:

Fee for Notice of Appeal:	<u>\$500.00</u>
Fee for Extension of Time:	<u>\$570.00</u>
TOTAL FEE FOR NOTICE OF APPEAL AND EXTENSION OF TIME:	<u>\$1,070.00</u>

The fee for the Notice of Appeal and extension of time is to be paid as follows:

☐ A check in the amount of _____ for the Notice of Appeal and extension of time is enclosed.

☒ Please charge Deposit Account No. **19-4675** in the amount of **\$1,070.00**

☒ The Director is hereby authorized to charge payment of the following fees associated with communication or credit any overpayment to Deposit Account No. **19-4675**

☒ Any additional filing fees required under 37 C.F.R. 1.16.

☒ Any patent application processing fees under 37 CFR 1.17.

☒ If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. **19-4675**

☐ Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Free **PAID** Only!